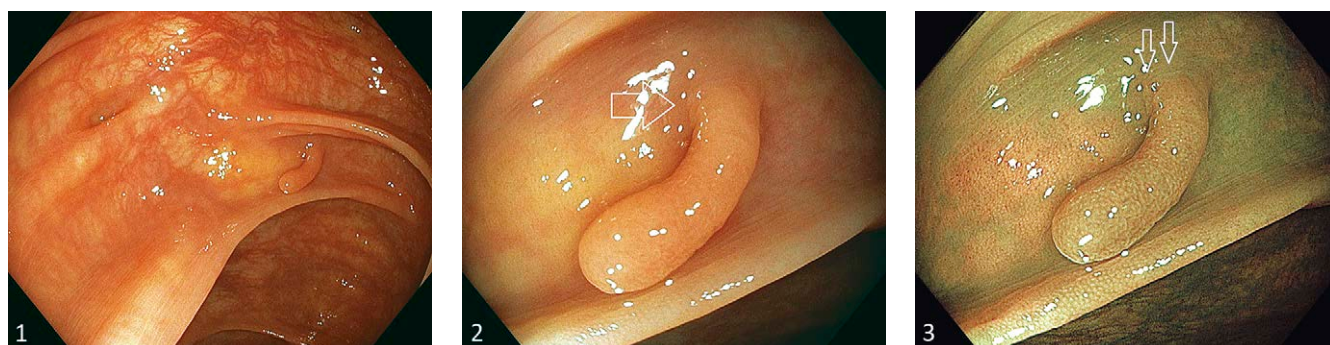


A Small Colonic Pedunculated Polypoid Lesion in the Context of Diverticulosis: The Ring-a-bell Sign

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A 71-year-old man was referred to our hospital for haematochezia. Physical examination revealed mild pain on palpation in the left lower abdominal quadrant. Laboratory data, including a complete blood count, were normal. Colonoscopy found multiple small diverticular orifices predominantly located in the left colon, and a small pedunculated stalk-like lesion in the ascending colon in an area with few diverticula. Fig. 1 presents the colonoscopic view of a diverticular orifice next to the polypoid lesion. In high-definition white light and narrow-band imaging its covering mucosa had a similar pattern to the surrounding mucosa. The presence of small concentric pale (“Aurora”) rings surrounding the lesion base, allowed us to correctly diagnose the inverted diverticulum [1, 2], thus avoiding a potentially unsafe procedure [3, 4]. Fig. 2 brings a closer look to the polypoid mass, covered by shiny pink mucosa with concentric rings surrounding its origin (arrow). Fig. 3 represents a colonoscopic view of the diverticulum using high-definition narrow-band imaging, which clearly delineate the Aurora rings (arrows).

Inverted diverticula were encountered in a study in 1.7% of the 810 patients who underwent colonoscopy, a population in whom the prevalence of colonic diverticula was 27% [5]. And since colorectal cancer screening is becoming a common practice in many regions, the increasing number of colonoscopic examinations will also unmask such encounters.

The expanding field of artificial intelligence makes it even more dangerous, because of the strong resemblance between an inverted colonic diverticulum and a true colonic polyp, as in the presented case. A less cautious or experienced

endoscopist comfortably relying on a machine’s virtual eye would be less prone to considering a differential, and excision or biopsy of such a lesion could result in perforation. It takes a trained eye, as well as critical reasoning starting from the identification of coexisting diverticula, to become skilled in such differentiations.

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